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**REQUEST FOR WITHDRAWAL
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Application Number	10/082,129
Filing Date	02/26/2002
First Named Inventor	Akira Mashino
Art Unit	2655
Examiner Name	To, Doris Ha
Attorney Docket Number	WC-01-11-03.00

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
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<input checked="" type="checkbox"/> Firm or Individual Name	Ms. Shoko I. Leek Christensen O'Connor Jhonson Kindness PLLC		
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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